

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10713696 FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
1							
2	1						
3	1						
4	1						
5		4					
6	1						
7	1						
8		5					
9		4					
10	1						
11		5					
12		4					
13	1						
14							
15		1					
16		1					
17		5					
18							
19							
20							
21							
22		5					
23		4					
24		1					
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45							
46							
47							
48	1						
49		1					
50							
TOTAL IND.	7						
TOTAL DEP.	35	↔	↔				
TOTAL CLAIMS	42	████████	████████	████████	████████	████████	████████

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.		↔	↔	↔	↔	↔
TOTAL CLAIMS		████████	████████	████████	████████	████████